

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W	71539	03-01-00
O.I.P.E. CLASSIFIER	CX	27	3/10
FORMALITY REVIEW		(C9A)(6)	1/4/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Original	1/1/00
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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